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FORM TO BE USED BY A PRISONER IN
FILING A CIVIL RIGHTS COMPLAINT

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CLERK U.S. DISTRICT COURT
NORTHERN DISTRICT OF OHIO
CLEVELANDUNITED STATES DISTRICT COURT
for the
NORTHERN DISTRICT OF OHIODeAnthony B. Curry
Plaintiff,

v.

Ashtabula County Medical Center
Defendant.

Case No.

1:14CV2719

JUDGE

COMPLAINT

JUDGE NUGENT

Jury Trial Demanded

I. Previous Lawsuits

MAG. JUDGE BAUGHMAN

A. Have you begun other lawsuits in the state or federal court dealing with the same facts involved in this action or otherwise relating to your imprisonment? YES ☒ NO

B. If your answer to A is yes, describe the lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline.)

1. Parties to this previous lawsuit:

Plaintiffs N/ADefendants N/A2. Court (if federal court, name the district, if state court, name the county): N/A

3. Docket Number: N/A

4. Name of judge to whom case was assigned: N/A

5. Disposition (for example: Was the case dismissed? Was it appealed? Is it still pending?)

N/A

6. Approximate date of filing lawsuit: N/A

7. Approximate date of disposition: N/A

II. Place of Present Confinement: Lake Erie Correctional Institution

A. Is there a prisoner grievance procedure in this institution? ☒ YES NO

B. Did you present the facts relating to your complaint in the state prisoner grievance

procedure? YES ☒ NO

C. If your answer is "yes",

1. What steps did you take? N/A

2. What was the result? N/A

D. If your answer is NO, explain why not: N/A

E. If there is no prison grievance procedure in the institution, did you complain to prison authorities? YES ☒ NO

F. If your answer is "yes",

1. What steps did you take? N/A

2. What was the result? N/A

III. Parties

(In item A below, place your name in the first blank and place your present address in the second blank. Do the same for additional plaintiffs, if any).

A. Name of the Plaintiff: DeAnthony B. Curry

Address: LaECI 501 Thompson Rd. P.O. Box 8000 Conneaut, Ohio 44030

(In item B below, place the full name of the defendant in the first blank, his or her official position in the second blank, and his or her place of employment in the third blank. Use

item C for the names, positions and places of employment of any additional defendants).

B. Defendant Ashtabula County Medical Center

2420 Lake Avenue Ashtabula, Ohio 44004

C. Additional Defendants N/A

IV. Statement of Claim

(State here as briefly as possible the facts of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separated paragraph. Use as much space as you need. (Attach extra sheet(s) if necessary).

1. Charges for services not rendered - Plaintiff had been a frequent self pay patient at ACMC Emergency room concerning discharge from his penis and

burning during urination. Plaintiff didn't know that the symptoms were caused by Gonorrhea & Chlamydia which is why the Plaintiff kept returning to AC MC Emergency room for medical attention. Plaintiff was incarcerated in Lorain Correctional Institution in January 2012 and was treated for the two S.T.D's by their medical staff. That's when the Plaintiff realized AC MC had been charging him for services not rendered. Dates of service - Unknown without medical records - Multiple Doctors Names - Unknown without medical records - Multiple From December 2010 to December 2011

2. Denied Treatment - Plaintiff went to AC MC Emergency room because he was experiencing discharge from penis and burning during urination. Plaintiff was examined by a physician and was told that he was fine and no further medical attention was needed. The physician didn't take any body fluids for testing and didn't prescribe any anti biotics to clear up the infection.

Dates of Service - Unknown without medical records - Multiple Doctors Names - Unknown without medical records - Multiple From December 2010 to December 2011

3. Companions and fetus's exposed to Infection - Plaintiff continued to engage in unprotected sexual intercourse

(Statement of the Claim continued)

with two pregnant women Nichole Hommes and Tamesa Jones because he trusted the physicians expert advice stating that the Plaintiff was fine when actually he wasn't. The Physicians false recommendation caused the Plaintiff to spread the infection unknowingly to two women and both were pregnant.

Dates of Service - Unknown without medical records - Multiple
Doctors Names - Unknown without medical records - Multiple
From December 2010 to December 2011

Damage to Reproduction System - When the Plaintiff was informed that he had Gonorrhea & Chlamydia at Lorain Correctional Institution he was treated by medical staff there and given a brief talk concerning the S.T.D's. Plaintiff was told that the infection had mutated and a stronger anti biotic would be needed than usual because the infection had gone untreated for a very long time and that non treatment can make a man sterile.

Dates of Service - January 2012

Doctors Names - Unknown without medical records

Interim - Plaintiff filing Subpoena for all medical records to procure and state doctors names and dates of service.

V. Relief

(State briefly exactly what you want the court to do for you. Make no legal arguments.

Cite no cases or statutes).

Compensatory & Punitive Damages-Award Plaintiff For
all damages / injuries \$100,000.00 for the following:

1. Charges for services not rendered.
2. Denied Treatment.
3. Companions and fetus's exposed to Infections.
4. Damage to Reproduction System.

Remove all related debt from Plaintiff's credit
report.

From December 2010 to December 2011

Signed this 8th day of December, 2014.

I declare under penalty of perjury that the foregoing is true and correct.

12-8-14

(Date)

De Anthony B. Curry
(Signature of Plaintiff)